(Revised 06/2012)

FEC

Only

STATEMENT OF

PAGE 1/5

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Cargile for Congress 4340 Redwood Highway ADDRESS (number and street) F119 (Check if address is changed) San Rafael 94903 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tom@politicalcommunicationsinc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2021 C00730812 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Montgomery, Thomas, , , Type or Print Name of Treasurer Montgomery, Thomas, , , [Electronically Filed] 06 30 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530

Local 202-694-1100

		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below	.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cor information below.)	nplete the candidate
Nam Can	ne of didate	Cargile, Mike, , ,	
	didate y Affiliati	on REP Office Sought: X House Senate President	State CA District 35
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	ıt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Na		. 390 💆
Cargile for Cor		
	Organization, Affiliated Committee, Joint Fundraising Representativ	ve, or Leadership PAC Sponsor
Make America First F		
Wake Allielica i list i		
Mailing Address	4340 Redwood Highway	
	F119	
	San Rafael	94903
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Represer	Leadership PAC Sponsor
 Custodian of Records: Ic books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee
Montgor Full Name	nery, Thomas, , ,	
	4340 Redwood Highway	
Mailing Address	F119	
	San Rafael	94903
Title or Position	CITY STATE	ZIP CODE
Record Keeper	Telephone number	415 - 250 - 4036
Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	ee; and the name and address of
Full Name Montgor of Treasurer	nery, Thomas, , ,	
Mailing Address	4340 Redwood Highway	
	[F119	
	San Rafael CA	94903
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	415

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other Depos safety deposit boxes or Name of Bank, Deposite	ory, etc.	
safety deposit boxes or Name of Bank, Deposite		
safety deposit boxes or Name of Bank, Deposite	cory, etc.	94960
safety deposit boxes or Name of Bank, Deposite	S. Bank 305 San Anselmo Avenue	
safety deposit boxes or Name of Bank, Deposite	S. Bank 305 San Anselmo Avenue San Anselmo CITY STATE	
safety deposit boxes or Name of Bank, Deposite U.S Mailing Address	S. Bank 305 San Anselmo Avenue San Anselmo CITY STATE	
safety deposit boxes or Name of Bank, Deposite U.S Mailing Address	S. Bank 305 San Anselmo Avenue San Anselmo CITY STATE	
Safety deposit boxes or Name of Bank, Deposite U.S Mailing Address	S. Bank 305 San Anselmo Avenue San Anselmo CITY STATE	
Safety deposit boxes or Name of Bank, Deposite U.S Mailing Address	S. Bank 305 San Anselmo Avenue San Anselmo CITY STATE	

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

Treasurer address changed, record keeper added and JFC issue resolved

Form/Schedule: Transaction ID: